State of California-Health and Welfare Agency

Pie	se print or type. (Form designed for use on elite (12-pitch) typewriter.)				UX MANAGEMENT	cramento, Californ	
A	WASTE MANIFEST QA   D  98   16   6   4   57   6   1000	anifest ument No.	2. Pag of	l is not law.	require	he shaded areas ad by Federal	
The second second	3. Generator's Name and Mailing Address City of Whittier (Corporate Yard)			A State Manifest Document Number 86544151			
Special designation of the last of the las	12016 Hadley, Whittier, Calif.  4. Generator's Phone (213) 945-8294			B. State Generator's ID CAD981664576			
	5. Transporter 1 Company Name 6. US EPA ID Number		C. Sta	te Transporter's I	o t	10173	
	Omega Recovery Services   QA D Q4 2 24 5	Name Delining and	nsporter's Phone te Transporter's	de proposition and	/698-0991		
	7. Transporter 2 Company Name 8. US EPA ID Numb	F. Transporter's Phone					
				G. State Facility's ID CADO 42245001			
Customer	12504 E. Whittier Blvd. Whittier, CA 90602  CA DO 4 22 45 0 0 1  213/698-0991						
	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Conta	Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.	
GENE	aWaste Flammable Liquid NOS UN 1993 (Paint Thinner) Flammable Liquid	o or	DM	DIDIDISH	G		
RA	b. Hazardous Waste Solid NOS ORM-E NA 9189	00 1		WIRELY 1			
OR	nazardous waste borre nos ona 1 m stor			01001315	9		
and the same of th	C.						
			1				
	d.						
	J. Additional Descriptions for Materials Listed Above		K Hai	ndling Codes for	Wastes	Listed Above	
NAMES OF THE PERSON NAMES	A. Paint Thinner						
	15. Special Handling instructions and Additional Information						
	See Mr. Phillips or Mr. Ramirez.						
-	16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway						
Andreas of Contrast of Contras	according to applicable international and national government regulations.  Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree that the section of the seconomically practicable and I have selected the method of treatment, storage, or disposal currently available to me which						
	minimizes the present and future threat to human health and the environment.  Printed/Typed Name  Signature  Signature	0 000	1	····		Month Day	
V	ROSERT R PHICLIES TOKAN TO	The	lle_	SANCTON OF THE SECOND STREET,		1311/11	
	Signature / Signature /						
	TSAAC Woods In Was	hac	[A	2000	4	DALLED	
	18. Transporter 2 Acknowledgement of Heceipt of Materials Printed/Typed Name Signature		CONTROL (A) TO			Month Day	
- 1	The state of the s			of se noted in I	em 19		
	20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by the Printed/Typed Name  Signature	nis manifes	si exce	pt as tioted in the		Month Day	